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(Depositor's name)
(Signature)
(Date)

APPLICATION NO. 10/511,094	FILING DATE 04/11/2005	FIRST NAMED INVENTOR Mohammad Jamal El-Hibri	ATTORNEY DOCKET NO. 260267US0X PCT	CONFIRMATION NO. 6221
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TITLE OF INVENTION: POLYSULFONE COMPOSITIONS EXHIBITING VERY LOW COLOR AND HIGH LIGHT TRANSMITTANCE PROPERTIES AND ARTICLES MADE THEREFROM

APPL.N. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	08/06/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRUONG, DUC	1796	528-171000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Obalon, Spiyak,  
 2. McClelland, Maier  
 3. & Neustadt, P.C.

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

SOLVAY ADVANCED POLYMERS, L.L.C.

Alpharetta, GEORGIA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

**4a. The following fee(s) are submitted:**

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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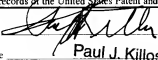
- ☐ A check is enclosed.  
☒ Payment by credit card. Transmitted via EFS-Web.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-00320 (enclose an extra copy of this form).

**5. Change in Entity Status (from status indicated above)**

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

  
 Paul J. Killos

Date

AUG 05 2008

Typed or printed name

Registration No.

Registration No. 58.014

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